U.S. Palent and Tradement Office; U.S. DEPARTMENT OF COMMERCE Index the Papersons Reduction Act of 1995, no persons are required to respond to a collection of information unless & displays a wald CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD

	PPLICATION	AS FIL	ED - PART	1				. OTHE	R THAN
		turn 1).		(Column 2).	SMALL	ENTITY	. OR		ENTITY
FÓR .	MUM	ER FILEO	KUI	MBER EXTRA	RATE (S)	FEE (A)		RATE (1)	FEE IS
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KAMINATION FEE		NA		N/A	NA	\$100	1 .	- N/A	-\$200
DTAL CLAMS 7.OFR (16(4)	7.6	minus 2	» · ·	75	X\$ 25 .		OR	X\$50 .	1
DEPENDENT CLASS 7 CFR 1 (5(N))	M5 3	Changes :		<del>-()</del>	X100 .	· · · · ·	1	X200 .	+
PPLICATION SIZE EE I CFR I 16(4)	sheets of its \$250 ( edditions	f paper, t \$125 for il 50 she	n and drawing he application small entity) h ats or fraction y(G) and 37 C	size fee due or each thereof, See					
ill-tiple dependent claim present (37 CFR 1 16(1)					. +160=			+360=	<u> </u>
If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL			TOTAL .	
APPU	(Column 1)	AMEND	(Column 2)		SMALL	- YTMY .	OR	OTHER	
: , 9 06	(Column 1) CLAIMS REMAINING AFTER	AMEND	(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3):	SMALL (RATE (S)	ADDI- TIONAL	OR		ADDI- TIONAL
: , 9 06	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	AMEND .	(Column 2) HIGHEST NUMBER	(Column 3):	V	ADDI-	,	RATE (6)	ADDI- TIONAL
, a Ub	Column 1) CLAIMS REMAHRING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3): PRESENT	RATE (6)	ADDI- TIONAL	OR .	RATE (S) X\$50.	ADDI- TIONAL
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Total as cra usus bespeciari go cra usus Application Site F	(Column 1) CLAIMS REMAINING AFTER AMENDMENT  Foo Q7 CFR 1.1	Minus Minus 6(5))	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3): PRESENT EXTRA	X\$.25 _ X100 _	ADDI- TIONAL	OR .	RATE (8) X\$50	ADDI- TIONAL
Total as cra usus bespeciari go cra usus Application Site F	(Column 1) CLAIMS REMAINING AFTER AMENDMENT  Fee (27 CFR 1.1) (Column 1)	Minus Minus 6(5))	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3): PRESENT EXTRA	X\$ 25 X100 +180=	ADDI- TIONAL	OR OR	FATE (5) X\$50 . X200 . +360=	ADDI- TIONAL
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"If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "2".

"If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "2".

"If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

I colocition of information is required by 37 CFR 1.16. The information is required to obtain or rotain a benefit by the public which is to file (and by the PD to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, afting gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments be amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS XRESS. SEND TO: Commissioner for Patients, P.O. Box 1460, Alexandria, VA 22313-1450.